Best Available Copy

| | | DETERMINATION | |
|--|--|---------------|--|
| | | | |
| | | | |
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| | | | |

Effective December 29, 1999

| Application | or | Docket | Number |
|-------------|----|--------|--------|
| | | | |

0162011

| CLAIMS AS FILED - PART I | | | | | SMALL | ENTITY | | OTHER | | |
|--|---|-------------------------------------|----------------------|---|------------------|---------------------|------------------------|--------|---------------------|------------------------|
| (Column 1) (Column 2) | | | TYPE | | OR. | SMALL | ENTITY | | | |
| FOR N | | NU | MBER FILE | NÚMBER | EXTRA | RATE | FEE | | RATE | FEE |
| | | | when the the wife of | and the same | 345.00 | OR | ** .01 | 690.00 | | |
| то | TOTAL CLAIMS minus 20= + 8 | | | | X\$ 9= | | OR | X\$18= | 144 | |
| INDEPENDENT CLAIMS 5 minus 3 = 1 | | | | | X39= | | OR | X78= | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | +130= | | OR | +260= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | TOTAL | | OR | TOTAL | 831 | | |
| | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | ENTITY | OR | OTHER SMALL I | |
| ΓA | | CLAIMS REMAINII AFTER | NG | HIGHEST NUMBER PREVIOUSLY | PRESENT | RATE | ADDI- TIONAL | | RATE | ADDI- TIONAL |
| | | AMENDM | | PAID FOR | EXTRA | | FEE | | | FEE |
| AMENDMENT | Total | • | Minus | ** | = | X\$ 9= | | OR | X\$18= | |
| AME | Independent | • NTATION C | Minus | *** | = | X39= | | or. | X78= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | OR | +260= | |
| | | | | | | TOTAL | | OR | TOTAL | |
| | | (O a la | . 41 | (Calumn 0) | (Caluma 0) | ADDIT. FEE | | 1 | ADDIT. FEE | |
| \vdash | | (Column CLAIM | | (Column 2) HIGHEST | (Column 3) | | ADDI- | 1 | | ADDI- |
| ENT B | | REMAINI AFTER AMENDM | ₹ | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | TIONAL | | RATE | TIONAL FEE |
| AMENDMENT | Total | * | Minus | ** | = | X\$ 9= | | OR | X\$18= | |
| AME | Independent | | Minus | *** | = | X39= | | OR | X78= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= | | | | | | | OR | +260= | | |
| | | | | • | | TOTAL ADDIT. FEE | t | OR | TOTAL ADDIT. FEE | , II |
| | | (Columr | າ 1) | (Column 2) | (Column 3) | | | | | |
| ENT C | | CLAIM REMAINI AFTEF AMENDM | S NG R | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| N O | Total | • | Minus | ** | = | X\$ 9= | | OR | X\$18= | , |
| AMENDMENT | Independent | * | Minus | *** | = | X39= | | OR | X78= | , |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | |